

AN APPARENT THIRD TESTICLE CONSISTING OF A SCROTAL
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ALTHOUGH accessory spleens have been found in a great variety of places in the abdomen, so far as I am aware, the presence of an accessory spleen, or rather a splenic appendage in the scrotum, has never been recorded.

The specimen here described was discovered by Dr Sheldon of the Orange River Colony, whilst performing a post-mortem examination on a negro. While examining the abdomen he found a remarkable band stretching from the inner aspect of the spleen, across the peritoneal cavity, down the left side of the abdomen to the left internal abdominal ring. Here it joined the spermatic cord, and, passing through the inguinal canal, terminated in a bulbous expansion, which was adherent to the upper pole of the testicle.

The specimen was removed, preserved in spirit, and dispatched to the Professor of Anatomy in the University of Manchester, who handed it to me for examination and report. The spleen had retained its shape well, but the tail was contorted and the testicle somewhat flattened.

The spleen possessed well-marked gastric and renal surfaces, but the colic surface was not well marked. The anterior border showed two notches, and the upper pole was large and prominent. Attached to the hilum was about an inch of the gastro-splenic omentum, while behind this traces of the lienorenal ligament containing the blood-vessels could be distinguished.

Arising from the upper part of the intermediate border, behind the lienorenal ligament, was a tail of splenic tissue, which curved downwards and slightly backwards. It rapidly diminished in size, so that about an inch from the spleen its dimensions were 10 mm. \times 6 mm. It eventually tapered down to a thin strand less than 1 mm. thick at a point about 10 cm. from the spleen. After a course of 3 cm. it swelled out for about 2 cm., after which it was continued down as a fine glistening strand, consisting merely of peritoneum. It passed within all the ensheathing layers of the spermatic cord, and it ended at the top of the testicle in a nodule of splenic tissue 2 cm. \times 1 cm.

The mass was adherent to the upper pole of the testis and was almost

completely ensheathed in the tunica vaginalis. Between the enlargement and the testicle on the inner side was a distinct fossa. Behind it was adherent to the spermatic cord.

The mass at the upper end of the testicle was examined microscopically, and it was found to consist of quite normal splenic tissue.

The tail must have passed through the peritoneal cavity, in front of the kidney and iliac colon, as it was completely ensheathed in peritoneum and showed no suggestion of a mesentery.

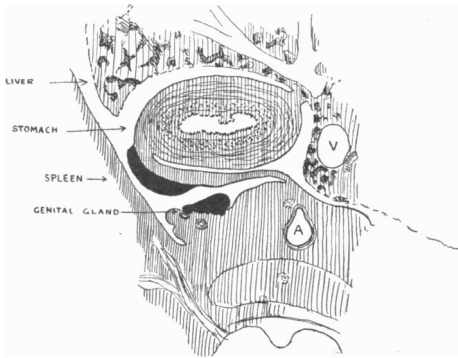


FIG. 2.—Diagrammatic sketch of a T.S. of Manchester embryo, No. 53, aged six weeks, showing the intimate relation of the developing spleen to the genital gland. Both spleen and genital are coloured black.

The total length of the tail was 33·4 cm., of which about 14·5 contained visible splenic tissue.

The explanation of this condition can be seen by examining a transverse section of a human embryo at the beginning of the sixth week. Such a section is illustrated diagrammatically in fig. 2. It will be seen that the rudimentary spleen as it is developed in the dorsal mesogastrium lies in apposition to the genital gland lying upon the posterior wall of the abdomen. Thus it is possible that any

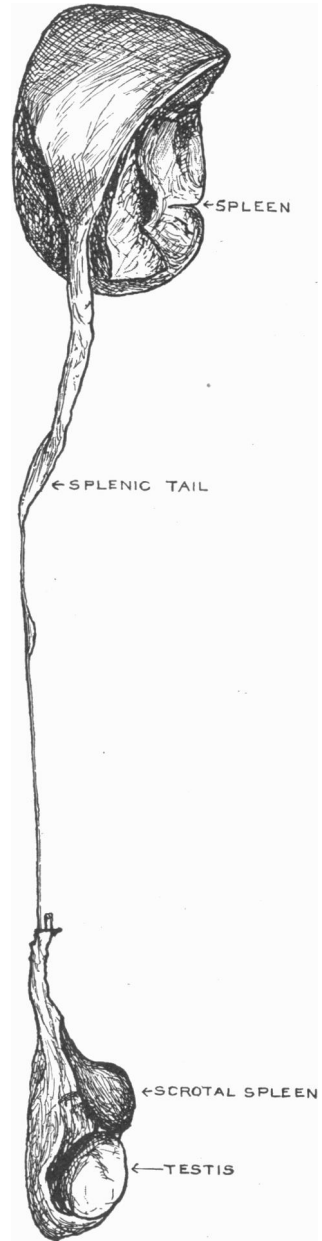


FIG. 1.—Sketch of the spleen and testicle with the tail straightened out.

342 An Apparent Third Testicle consisting of a Scrotal Spleen

slight inflammation of the peritoneum occurring at this stage may cause an adhesion to form between the spleen and the genital gland, and if this occurs, the descent of the genital gland would drag down a tail of the spleen into the scrotum, as has happened in this case.

This specimen is of great interest in view of the recent discussions upon the existence of a third testicle. It illustrates the great importance of verifying with great care, by dissection and microscopical examination, every suspected third testicle. Clinically this lower enlargement of the tail of the spleen would present all the characteristics of a supernumerary testicle. It also adds another item to the long list of differential diagnoses of swellings in the scrotum.